

Travel & Expense Account
Transmittal Sheet

After Approval, Mail Receipts To

SECRETARY FOR RESOURCES
P.O.BOX 944246
SACRAMENTO, CA 94244-2460



Employee Name	CHRISMAN, MIKE
Expense Dates	03/06/09-03/06/09
Total Expense Amount	224.20
Amount Due Employee	15.00
Form ID	TEA000435679

DIRECTIONS FOR SUBMISSION

1. *Attach the following receipts, and other appropriate documentation to this Transmittal Sheet.*

Date	Expense Item	Amount	If not submitted - Explain
1) 03/06	Parking, Auto	15.00	

2. *Forward Transmittal Sheet and attached documentation through your approval process.*

I have reviewed the following documents.

Approved
by:

PATRICK KEMP

Travel & Expense Account Summary

Employee Name MIKE CHRISMAN
Expense Dates 03/06/09-03/06/09
Report Name Scripps San Diego Event 3/6/09

Request Total \$ 224.20
Direct Charge Total - 209.20
Travel Advances - 0.00
Net Due Employee = 15.00

Trip Totals		
Trip/Expense Category	Trip Name	Total Amount
Regular Travel	San Diego 3/6/09	224.20

NOTE: (d)=Direct Charge

DATE	Fri Mar 6									TOTAL
Parking, Auto	15.00									15.00
Commercial Air Fare (d)	209.20									209.20
TOTALS \$	224.20									224.20

Travel & Expense Account
Transmittal Sheet

After Approval, Mail Receipts To

SECRETARY FOR RESOURCES
P.O. BOX 944246
SACRAMENTO, CA 94244-2460



Employee Name	CHRISMAN, MIKE
Expense Dates	03/18/09-03/19/09
Total Expense Amount	166.08
Amount Due Employee	166.08
Form ID	TEA000431286

DIRECTIONS FOR SUBMISSION

1. *Attach the following receipts, and other appropriate documentation to this Transmittal Sheet.*

	Date	Expense Item	Amount	If not submitted - Explain
1)	03/18	Lodging	82.08	
2)	03/19	Parking, Auto	29.00	
3)	03/19	Business Expense - Other	55.00	

2. *Forward Transmittal Sheet and attached documentation through your approval process.*

EXPENSE EXCEPTION(S)			
	Expense Rule	Exception	Response
1)	94:115	Automated Audits have not been applied to Business Expense-Other expense; approvers should review.	

I have reviewed the following documents.

Approved
by:

PATRICK KEMP

Travel & Expense Account Summary

Employee Name MIKE CHRISMAN
Expense Dates 03/18/09-03/19/09
Report Name California Biodiversity Council

Request Total \$ 166.08
Direct Charge Total - 0.00
Travel Advances - 0.00
Net Due Employee = 166.08

Trip Totals		
Trip/Expense Category	Trip Name	Total Amount
Regular Travel	CBC	166.08

NOTE: (d)=Direct Charge

DATE	Wed Mar 18	Thu Mar 19								TOTAL
Lodging	82.08									82.08
Parking, Auto		29.00								29.00
Business Expense - Other		55.00								55.00
TOTALS \$	82.08	84.00								166.08

Travel & Expense Account
Transmittal Sheet

After Approval, Mail Receipts To

SECRETARY FOR RESOURCES
P.O.BOX 944246
SACRAMENTO, CA 94244-2460



Employee Name	CHRISMAN, MIKE
Expense Dates	03/25/09-03/25/09
Total Expense Amount	15.00
Amount Due Employee	15.00
Form ID	TEA000431244

DIRECTIONS FOR SUBMISSION

1. *Attach the following receipts, and other appropriate documentation to this Transmittal Sheet.*

Date	Expense Item	Amount	If not submitted - Explain
1) 03/25	Parking, Auto	15.00	

2. *Forward Transmittal Sheet and attached documentation through your approval process.*

I have reviewed the following documents.

Approved
by:

PATRICK KEMP

Travel & Expense Account Summary

Employee Name MIKE CHRISMAN
Expense Dates 03/25/09-03/25/09
Report Name CA Municipal Utilities Assn

Request Total \$ 15.00
Direct Charge Total - 0.00
Travel Advances - 0.00
Net Due Employee = 15.00

Trip Totals		
Trip/Expense Category	Trip Name	Total Amount
Regular Travel	CMUA	15.00

NOTE: (d)=Direct Charge

DATE	Wed Mar 25									TOTAL
Parking, Auto	15.00									15.00
TOTALS \$	15.00									15.00

Travel & Expense Account Transmittal Sheet

After Approval, Mail Receipts To

SECRETARY FOR RESOURCES
P.O. BOX 944246
SACRAMENTO, CA 94244-2460



Employee Name CHRISMAN, MIKE
Expense Dates 03/30/09-04/02/09
Total Expense Amount 2185.73
Amount Due Employee 1252.33
Form ID TEA000435783

DIRECTIONS FOR SUBMISSION

1. Attach the following receipts, and other appropriate documentation to this Transmittal Sheet.

Date	Expense Item	Amount	If not submitted - Explain
1) 03/30	O/S Lodging	342.36	
2) 03/30	O/S Taxi Fare	15.00	
3) 03/31	O/S Lodging	342.36	
4) 03/31	O/S Incidentals	6.00	
5) 03/31	O/S Taxi Fare	20.00	
6) 04/01	O/S Lodging	342.36	
7) 04/01	O/S Incidentals	6.00	
8) 04/01	O/S Taxi Fare	6.25	
9) 04/02	O/S Parking, Auto	36.00	
10) 04/02	O/S Incidentals	6.00	
11) 04/02	O/S Taxi Fare	12.00	

2. Forward Transmittal Sheet and attached documentation through your approval process.

CLAIM EXCEPTION(S)		
Item	Exception	Response
1) #A6 DPA required	Document of Prior Approval required for Out of State Travel.	Yes

I have reviewed the following documents.

Travel & Expense Account
Transmittal Sheet

Approved
by:

PATRICK KEMP

Travel & Expense Account Summary

Employee Name MIKE CHRISMAN
Expense Dates 03/30/09-04/02/09
Report Name DC March 30-Apr 2

Request Total \$ 2185.73
Direct Charge Total - 933.40
Travel Advances - 0.00
Net Due Employee = 1252.33

Trip Totals		
Trip/Expense Category	Trip Name	Total Amount
Regular Travel	DC 03/30/09	2185.73

NOTE: (d)=Direct Charge

DATE	Mon Mar 30	Tue Mar 31	Wed Apr 1	Thu Apr 2						TOTAL
O/S Lodging	342.36	342.36	342.36							1027.08
O/S Breakfast	6.00	6.00	6.00	6.00						24.00
O/S Lunch	10.00	10.00	10.00	10.00						40.00
O/S Dinner	18.00	18.00	18.00							54.00
O/S Taxi Fare	15.00	20.00	6.25	12.00						53.25
O/S Commercial Air Fare (d)	933.40									933.40
O/S Incidentals		6.00	6.00	6.00						18.00
O/S Parking, Auto				36.00						36.00
TOTALS \$	1324.76	402.36	388.61	70.00						2185.73